

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

Program Code: 02201  
Status Code: 0  
Fee Category: 7C  
Exp. Date: 20120731  
Fee Comments: \_\_\_\_\_  
Decom Fin Assur Reqd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: KATBI, FUAD F., M.D., F.A.C.C.  
Received Date: 20060714  
Docket No: 3036024  
Control No.: 315569  
License No.: 21-32399-01  
Action Type: Amendment

2. FEE ATTACHED

Amount: \_\_\_\_\_  
Check No.:                     

3. COMMENTS

Signed K. Bernardino  
Date 7-17-06

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / )

- 1. Fee Category and Amount: \_\_\_\_\_
- 2. Correct Fee Paid. Application may be processed for:
  - Amendment \_\_\_\_\_
  - Renewal \_\_\_\_\_
  - License \_\_\_\_\_
- 3. OTHER \_\_\_\_\_

Signed \_\_\_\_\_  
Date \_\_\_\_\_